STATE OF NEW HAMPSHIRE

2017 Statement of Income and Expenses for LOBBYISTS (RSA Chapter 15)

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PLEASE PRINT

APR 18 2017 Ed Leahy I. Name of Lobbyist(s) NEW HAMPSHIKE DEPARTMENT OF STATE II. Name of lobbyist's partnership, firm or corporation, if any: Adapt Pharma, Inc. (Name of partnership, firm or corporation) c/o Politicom Law LLP, 28 Liberty Ship Way, Suite 2815, Sausalito, CA 94965 Business Address: (Street) (Town/City) (415) 903-2800 (415) 610-7604 _ e-mail __reporting@politicomlaw.com (Telephone) III. This statement covers: (Choose one - file separate reports for each client, OR you may file a separate report for reportable expense transactions which are not attributable to any one client). X All reportable transactions occurring in the months prior to the reporting date relative to the following client: Adapt Pharma, Inc. (Full Name of Client as it appears on the Lobbvist Registration Form) OR [] All reportable transactions by the lobbyist (including the lobbyist's family), or the lobbying firm listed below which are unrelated to any particular client. IV. Date of Report April 26, 2017 🔯 July 26, 2017 Reports cover: activity from date of registration to 3/31/17 activity from 4/1/17 to 6/30/17 October 25, 2017 January 31, 2018 activity from 7/1/17 to 9/30/17 activity from 10/1/17 to 12/31/17 V. There have been no fees received and no reportable transactions made since the last report. If this box is checked, complete just this form and submit it to the Secretary of State's Office, State House, Room 204, Concord, NH 03301. VI. Check if additional reports are attached: X If you have received fees or made expenditures, you must file Addendum A-Fees and Expenses If you have paid an honorarium or reimbursed expenses, you must file Addendum B. Report of Honorariums or **Expense Reimbursement** If you, your firm, or your family has made political contributions, you must file Addendum C-Political Contributions Sworn Statement/Affirmation by Lobbyist I have read RSA 15, RSA 15-B, RSA 14-C and RSA 664 and hereby swear or affirm that the foregoing information is true and complete to the best of my knowledge and belief. (Signature of lobbyist)

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(Print Name of lobbyist)

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Lobbyists Fees and Expenses Addendum A

(RSA Chapter 15:6)

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	NEW HAMPSHIRE
11. Name of lobbyist's partnership, firm or corporation, if any:	DEPARTMENT OF ST
(Name of partnership, firm or corporation)	· . · · · · · · · · · · · · · · · · · ·
III. Name of Client Adapt Pharma, Inc.	Date
IV. Fees Received Indicate the gross amount of all fees received from the client identified above to lobbying, including fees for services such as public advocacy, government including research, monitoring legislation, and related legal work. The greeduced by any expenses:	t relations, or public relations services
a) Total of all fees received in this reporting period	a) \$1,230.72
b) Total of all fees received this calendar year, prior to this reporting period (This should equal the total of all prior monthly reports for this calendar year)	b) \$0 ear)
c) Total of all fees received to date (Add lines a and b)	c) \$1,230.72
d) Indicate the amount of any such fees that are due, but have not yet been paid	d) \$
V. Expenses: Lobbyist(s)/Lobbying partnerships, firms, or corporations are required to repfees. Separate reports are to be filed for expenditures made relative to each of the lobbyist(s)/firm that are unrelated to any one client a separate report of Expenses are to be reported in one of three categories of expenses: (a) the during the reporting period for salaries, benefits, support staff, and office exindividual expenses where the expenditure was of \$25.00 or less (for example lunch where the cost was \$25.00 or less, purchase of a pen with a value of lessing lobbied, purchase of a ceremonial object given to a person being lobbied (c) an itemized statement of each individual expenditure made during this repeating purpose not covered by (a) (for example; purchase of a meal with value ceremonial object to be given to the subject of lobbying with a value greater restaurant expenses for a legislative reception). Expenses for honorariums.	client and if expenditures are made by may be filed for the lobbyist(s)/firm. e aggregate total of all expenses paid expenses; (b) the aggregate total of all le: meals purchased during a business st than \$10 that is given to the person ed with a value of \$25.00 or less); and orting period of greater than \$25.00 for ue of greater than \$25, purchase of a er than \$25, but not greater than \$50, expense reimbursement, or political
contributions will be reported on separate addendums and should not be report	ed on Addendam A.
a) Total aggregate expenses for this reporting period for salaries, benefits, support staff, and office expenses, related directly or indirectly to lobbying.	a) \$
a) Total aggregate expenses for this reporting period for salaries, benefits,	

(Add lines a, b and c)	d) \$	0
e) Total of expenses paid this calendar year, prior to this reporting period (This should be the amount on line f of addendum A for last month's report)	e) \$	0
f) Total of all expenses year to date	() \$	0
VI. Other Expenses: Provide the following detail for all expenditures of more than \$25 made from leperiod, including by whom paid or to whom charged.	obbying fees o	during this reporting
Paid to:	Amount:	
N/A	\$ ()
	\$	
	\$	
	\$	
Consideration and the constant of the constant	\$	
	\$	· · · · · · · · · · · · · · · · · · ·
Sworn Statement/Affirmation by Lobbyist		
I have read RSA 15, RSA 15-B and RSA 664 and hereby swear or affirm	n that the for	regoing information
is true and complete to the best of my knowledge and belief.	,	
(Signature of lobbyist)	4/11/	//>
(Signature of lobbyist)	(D	ate)
(Signature of lobbyist) (Print Name of lobbyist)		
(Print Name of lobbyist)		